## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

28891-101

| CLAIMS AS FILED - PART I  |   |  |              |                               |                              |                  | SM          | SMALL ENTITY      |                        |    | OTHER TH            |                        |
|---|---|--|--------------|-------------------------------|------------------------------|------------------|-------------|-------------------|------------------------|----|---------------------|------------------------|
|   |   |  | (Column 1)   |                               | (Column 2)                   |                  | TY          | TYPE              |                        | OR | SMALL               | ENTITY                 |
| TOTAL CLAIMS  |   |  | 76           |                               |                              |                  |             | RATE              | FEE                    |    | RATE                | FEE                    |
| FOR   |   |  | NUMBER FILED |                               | NUMBER EXTRA                 |                  | ВА          | SIC FEE           | 370.00                 | OR | BASIC FEE           | 740.00                 |
| TOTAL CHARGEABLE CLAIMS   |   |  | ებ minus 20≃ |                               | * 70                         |                  | ,           | X\$ 9=            |                        | OR | X\$18=              | \$10                   |
| INDEPENDENT CLAIMS  |   |  | 3 minus 3 =  |                               | *                            |                  |             | X42=              |                        | OR | X84=                |                        |
| MU  | LTIPLE DEPEN  | DENT CLAIM PI                                  | ESENT        |                               |                              |                  | +           | -140=             |                        | OR | +280=               |                        |
| * If  | the difference  | in column 1 is                                 | less than ze | ss than zero, enter "0" in co |                              |                  | T           | OTAL              |                        | OR | TOTAL               | 840                    |
|   | C   | LAIMS AS A                                     | MENDED       | - PAR                         | · PART II                    |                  |             | <del></del>       |                        |    | OTHER               | THAN                   |
|   |   | (Column 1)                                     | (Column 2)   |                               |                              | (Column 3) SMALI |             | MALLE             | ENTITY                 | OR | SMALL               | ENTITY                 |
| AMENDMENT A   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT      |              | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY                 | PRESENT<br>EXTRA | F           | RATE              | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *  | Minus        | **                            |                              | =                | >           | <b>(\$ 9=</b>     |                        | OR | X\$18=              |                        |
|   | Independent   | *  | Minus        | <u> </u>                      |                              | =                | ,           | X42=              |                        | OR | X84=                |                        |
|   | FIRST PRESE   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |              |                               |                              |                  |             |                   |                        | OR | +280=               |                        |
|   |   |  |              |                               |                              |                  |             | TOTAL<br>DIT. FEE |                        | OR | TOTAL<br>ADDIT. FEE |                        |
|   |   | (Column 1)                                     |              | (Colu                         | mn 2)                        | (Column 3)       | ADI         | J. 1              |                        |    |                     |                        |
| AMENDMENT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT      |              | HIGH                          | HEST<br>BER<br>OUSLY         | PRESENT<br>EXTRA | F           | RATE              | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *  | Minus        | **                            |                              | = .              | >           | <b>(\$</b> 9=     |                        | OR | X\$18=              |                        |
|   | Independent   | *  | Minus        | ***                           | - 01 1111                    | =                | X42=        |                   |                        | OR | X84=                |                        |
|   | FIRST PRESE   | NTATION OF MI                                  | JLTIPLE DEF  | ENDEN                         | CLAIM                        |                  | +           | 140=              |                        | OR | +280=               |                        |
|   |   |  |              |                               |                              |                  |             | TOTAL<br>DIT. FEE |                        | OR | TOTAL<br>ADDIT. FEE |                        |
|   |   | (Column 1)                                     |              |                               | mn 2)                        | (Column 3)       |             |                   |                        |    |                     |                        |
| AMENDMENT C   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT      |              | NUM<br>PREVI                  | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA | f           | RATE              | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *  | Minus        | **                            |                              | =                | <b> </b>    | <b>(</b> \$ 9=    |                        | OR | X\$18=              |                        |
|   | Independent   | *<br>ENTATION OF M                             | Minus        | ***                           | T CLAIM                      | =-               |             | X42=              |                        | OR | X84=                |                        |
| L   | Tring Prest   | INTATION OF IV                                 | VEHICLE DE   | LINDEIN                       | , OLANV                      |                  | <b>,</b> [_ | 140=              |                        | OR | +280=               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |  |              |                               |                              |                  |             |                   |                        |    | TOTAL               |                        |
| **  | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |              |                               |                              |                  |             |                   |                        |    |                     |                        |